

CLAIMS ONLY						Application Number <b>10/657527</b>	Filing Date		
						Applicant(s)			
<b>10-27-04</b>						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1		/							
2		/							
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Total Indep			3						
Total Depend		10							
Total Claims		13							